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Under the Paperwork Reduction Act of 1995, no persons are required to PETITION FOR EXTENSION OF TIME UNDER 37 (	Docket Number (Optional)				
FY 2008		BUF	RF-P02-006		
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  Application Number 10/081,736 Filed February 20, 2002					
For BIGLYCAN AND RELATED THERAPEUTICS A	ND METHODS		· ·		
Art Unit 1649		Examiner	O. N. Cheri	nyshev	
This is a request under the provisions of 37 CFR 1.136(a) application.	to extend the peri	od for filing a reply in	n the above i	dentified	
The requested extension and fee are as follows (check time	e period desired a	and enter the approp	oriate fee bel	ow):	
	<u>Fee</u>	Small Entity Fe	<del>-</del>		
One month (37 CFR 1.17(a)(1))	\$120	\$60	<b>\$</b> _	***	
Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$		
x Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$	525.00	
Four months (37 CFR 1.17(a)(4))	\$1640	\$820	<b>\$</b>		
Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$		
X Applicant claims small entity status. See 37 CF	R 1.27.				
A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
The Director has already been authorized to charge fees in this application to a Deposit Account.					
X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-1945 . I have enclosed a duplicate copy of this sheet.  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
I am the applicant/inventor.					
assignee of record of the entire int Statement under 37 CFR 3.7	erest. See 37 C '3(b) is enclosed	FR 3.71. . (Form PTO/SB/9	6).		
x attorney or agent of record. Regis	tration Number	54,144			
attorney or agent under 37 CFR 1.	.34.				
Registration number if acting under					
		Jun	e 30, 2008		
Signature			Date		
Z. Angela Guo, Ph.D.  Typed or printed name			7) <u>951-7546</u> hone Numbe	er	
NOTE: Signatures of all the inventors or assignees of record of the entithan one signature is required, see below.	re interest or their repr	,			
X Total of forms are submitted	ed.				

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature:

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duction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. Docket Number (Optional) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) BURF-P02-006 **FY 2008** (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) February 20, 2002 Filed 10/081,736 Application Number BIGLYCAN AND RELATED THERAPEUTICS AND METHODS OF USE Examiner O. N. Chernyshev Art Unit 1649 This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Small Entity Fee <u>Fee</u> \$60 \$120 One month (37 CFR 1.17(a)(1)) \$230 Two months (37 CFR 1.17(a)(2)) \$460 525.00 \$1050 \$525 Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) \$1640 \$820 \$2230 \$1115 Five months (37 CFR 1.17(a)(5)) Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to . I have enclosed a duplicate copy of this sheet. Deposit Account Number 18-1945 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number 54,144 attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 June 30, 2008 Date S gnature (617) 951-7546 Z. Angela Guo, Ph.D. Telephone Number Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. forms are submitted. Total of

I hereby certify that this paper (along with at the date shown below with sufficient postage Box 1450, Alexandria, VA 22313-1450.	e as First Class Ma	ail, in an envelop	e addressed to: IVIS Amer	idilient, Com	missioner for Fateria, F.O.
Dated: 6 30 108	Signature:	Elvine	Leahan 1	Elaine	Leahy

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PTO/SB/17 (10-07)

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Order the Paperwork Reduction Act of		00 10 100	pone to a consess.	Com	olete if Know	'n	
Effective on 12/08 Fees pursuant to the Consolidated Approp		318). A	Application Num		0/081,736		
FEE TRANSMITTAL			iling Date		ebruary 20, 2	002	
			irst Named Inv	entor J	ustin R. Fallo	n	
For FY 2	<u> </u>	[E	xaminer Name	(	). N. Chernys	hev	
X Applicant claims small entity sta	tus. See 37 CFR 1.27	4	Art Unit	1	649		
TOTAL AMOUNT OF PAYMENT	(\$) 525.00		Attomey Docket I	No. E	URF-P02-006	5 	
METHOD OF PAYMENT (check	all that apply)						
Check Credit Card	Money Order	None	Other (	please identify	·		
X Deposit Account Deposit Account	Number: 18-194	45	Deposit A	Account Name:	Ropes	& Gray L	<u>LP</u>
For the above-identified dep	osit account, the Direc	tor is h	ereby authorize	d to: (checl	k all that apply)		
x Charge fee(s) indicate	d below		Charge	e fee(s) indi	cated below, ex	cept for t	ne filing fee
Charge any additional fee(s) under 37 CFR 1		nts of	x Credit	any overpa	yments		
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES						
F	LING FEES	SEAF	RCH FEES Small Entity	EXAMIN	ATION FEES Small Entity	٠	
Application Type Fee (	Small Entity 5) Fee (\$) Fe	ee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees F	Paid (\$)
Utility 310	155	510	255	210	105		
Design 210	105	100	50	130	65		
Plant 210	105	310	155	160	80		
Reissue 310	155	510	255	620	310		
Provisional 210	105	0	0	0	0		
2. EXCESS CLAIM FEES						- (0)	Small Entity
Fee Description Each claim over 20 (including Reis	sues)					<u>Fee (\$)</u> 50	Fee (\$) 25
Each independent claim over 3 (inc	luding Reissues)					210	105
Multiple dependent claims						370	185
Total Claims Extra Claims	Fee (\$)	Fee Pa	id (\$)	Mu	Itiple Depende	ent Claims	
16 - 20 = 0  HP = highest number of total claims paid for	x =			<u>Fee</u>	<u>= (\$)</u> !	Fee Paid (\$	<u>5)</u>
Indep. Claims Extra Claims	•	Fee Pa	id (\$)				_
1 -10 = 0	x = =						
HP = highest number of independent claim	s paid for, if greater than 3.						
3. APPLICATION SIZE FEE  If the specification and drawings e listings under 37 CFR 1.52(e)),	the application size for	ee due i	is \$260 (\$130 f	onically file or small en	ed sequence or tity) for each a	computer dditional 5	0
sheets or fraction thereof. See	,,,,,					E	D-1-1 (A)
<u>Total Sheets</u> <u>Extra Shee</u>			fitional 50 or frac			<u>- ree</u>	Paid (\$)
4. OTHER FEE(S)	<del>,</del>			,		Fees	Paid (\$)
Non-English Specification, \$13						•	
Other (e.g., late filing surcharge	: 2253 Extension for	or resp	onse within th	ird month		52	25.00
SUBMITTED BY							
Signature			legistration No. Attorney/Agent)	54,144	Telephone	(617) 95	1-7546
Name (Print/Type) Z. Angela Guo, F	Ph.D.		-		Date	June 30	, 2008

the date :	certify that this paper (along wit shown below with sufficient pos ), Alexandria, VA 22313-1450.	tage as First Class	d to as being attached or enclosed Mail, in an envelope addressed to	) is being deposited with the U.S. Postal Service on : MS Amendment, Commissioner for Patents, P.O.
	10130108		Plain Leake	( Elaine Leahy)

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Effective on 12/08/2004.			Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			mber	er 10/081,736 February 20, 2002			
FEE TRANSMITTAL			Filing Date		Justin R. Fallor		
For FY 2008			First Named In				
California C. N. Gronysto							
			<del></del>	DUDE DOS COS			
TOTAL AMOUNT OF PAYMEN	1	(\$) 525.00	Attorney Docke	t NO.			
METHOD OF PAYMEN	(check all	that apply)					
Check Credit C	ard [	Money Order 1	None Other	(please iden	tify):		
X Deposit Account Depos	sit Account Num	ber: 18-1945	Deposi	t Account Nar	me: Ropes	& Gray LL	P
For the above-identi	fied deposit	account, the Directo					
x Charge fee(s)	indicated be	elow	Char	ge fee(s) iı	ndicated below, ex	cept for the	filing fee
Charge any action fee(s) under 3	dditional fee 7 CFR 1.16	(s) or underpayments and 1.17	of x Credi	t any over	payments		
FEE CALCULATION							
1. BASIC FILING, SEARCH					=====		
	FILIN	IG FEES S Small Entity	SEARCH FEES Small Entity		INATION FEES Small Entity	٠	
Application Type	Fee (\$)	Fee (\$) Fee		<u>Fee (\$</u>		Fees Pa	<u>iid (\$)</u>
Utility	310	155 51	0 255	210	105		
Design	210	105 10		130	65		
Plant	210	105 31		160	80		
Reissue	310	155 51		620	310		<u>-</u>
Provisional	210	105	0 0	0	0		
2. EXCESS CLAIM FEES						Fee (\$)	mall Entity Fee (\$)
Fee Description Each claim over 20 (including	ina Reissues	:)				50	25
Each independent claim over						210	105
Multiple dependent claims		,				370	185
Total Claims Extra	Claims	Fee (\$) Fe	e Paid (\$)	1	Multiple Depende	nt Claims	
	16 -20 = 0 x = Fee (\$) Fee Paid (\$)						
HP = highest number of total clai	ms paid for, if			_			-
		Fee (\$) Fe	e Paid (\$)				
1 • 10 = HP = highest number of indepen	) x dent claims pai	id for, if greater than 3.					
3. APPLICATION SIZE FEE	•						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
					Foo ( <b>f</b> )	Eoo P	aid (\$)
	ktra Sheets	/50 =	h additional 50 or fr (round up to a w			=	<u>αία (ψ/</u>
4. OTHER FEE(S)						Fees F	Paid (\$)
Non-English Specificati							
Other (e.g., late filing su	rcharge): 2	253 Extension for	response within	third mon	ith	52	5.00
SUBMITTED BY	00						
Signature	1	<u> </u>	Registration No. (Attorney/Agent)	54,144	4 Telephone	(617) 951	-7546
Name (Print/Type) Z. Angela	Guo, Ph.(	D			Date	June 30,	2008

I hereby certify that this paper (along with a the date shown below with sufficient postag Box 1450, Alexandria, VA 22313-1450.	ny paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on e as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O.
Dated:(g   30   08	Signature: Claire Leahy)